FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Flores, Mayra, Nohemi, ,						
	(b) Address (number and street) PO Box 516	☐ Check if address changed		Candidate's FEC Identification Number H2TX34113			
	(c) City, State, and ZIP Code					3. Is This N	ew Amended
	Los Indios		TX	7856	7-0516	Statement (N	I) OR (A)
4.	Party Affiliation	5. Office Sought			6. State & Distr	rict of Candidate	
	REPUBLICAN PARTY	House			TX	34	
	DE	SIGNATION	OF PRI	NCIPAL	CAMPAIGN	N COMMITTEE	
7.	I hereby designate the following nar	med political comr	mittee as m	y Principal (Campaign Comn	nittee for the 2022 (year of elec	election(s).
	NOTE: This designation should be f	iled with the appr	opriate offic	e listed in the	ne instructions.		
	(a) Name of Committee (in full)						
	Mayra Flores for Co	ngress					
	(b) Address (number and street)						
	PO Box 516						
	(c) City, State, and ZIP Code						
	Los Indios				TX	78567-0516	
	DE	SIGNATION	OF OTH	HER AU	THORIZED	COMMITTEES	
		(Inc	cluding Joint	t Fundraisin	g Representative	es)	
8.	I hereby authorize the following name candidacy.	ned committee, w	hich is NOT	my principa	al campaign com	nmittee, to receive and ex	pend funds on behalf of my
	NOTE: This designation should be f	iled with the princ	ipal campai	gn committe	ee.		
	(a) Name of Committee (in full)						
	TAKE BACK THE H	IOUSE 202	22				
	(b) Address (number and street) PO BOX 30844						
	1 O BOX 30044						
	(c) City, State, and ZIP Code						
	BETHESDA				MD	20824	
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.							
Si	gnature of Candidate					Date	
Fi	Flores, Mayra, Nohemi, , [Electronically Filed] 10/13/2022						
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NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							

FEC FORM 2 (REV. 02/2009)

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES
(Including Joint Fundraising Representatives)

3.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	GT FARM TEAM 2022							
	(b) Address (number and street) PO BOX 30844							
	(c) City, State, and ZIP Code			_				
	BETHESDA	MD	20824					
	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full) TEAM MAYRA							
	(b) Address (number and street) 1005 CONGRESS AVENUE SUITE 400							
	(c) City, State, and ZIP Code							
	AUSTIN	TX	78701					
3.	I hereby authorize the following named committee, which is NOT my principal candidacy. NOTE: This designation should be filed with the principal candidacy. Name of Committee (in full) CRUZ 25 FOR 22 VICTORY FUND							
	(b) Address (number and street) P.O. BOX 341027							
	(c) City, State, and ZIP Code							
	AUSTIN	TX	78734					
C	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE: This designation should be filed with the principal campaign committee. a) Name of Committee (in full)							
	IRON LADIES PAC							
	(b) Address (number and street) PO BOX 341027							
	(c) City, State, and ZIP Code							
	AUSTIN	TX	78734					

FEC Form 2S (Revised 02/2017)

Optional Supplemental Page for Designation of Additional Authorized Committees

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DESIGNATION OF OTHER AUTHORIZED COMMITTEES(Including Joint Fundraising Representatives)

8.	I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full)							
	TEXAS RELOADED							
	(b) Address (number and street) 5900 MEMORIAL DR STE 215							
	(c) City, State, and ZIP Code							
	HOUSTON	TX	77007					
8.	hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(a) Name of Committee (in full) GOP WINNING WOMEN MAJORITY MAKERS							
	(b) Address (number and street) 228 S WASHINGTON ST STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA	VA	22314					
8.	nereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE: This designation should be filed with the principal campaign committee. I) Name of Committee (in full) GOP WINNING WOMEN-TEXAS							
	(b) Address (number and street)							
	228 S WASHINGTON ST STE 115							
	(c) City, State, and ZIP Code							
	ALEXANDRIA	VA	22314					
8.	nereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my andidacy. NOTE : This designation should be filed with the principal campaign committee.							
	(b) Address (number and street)							
	(c) City, State, and ZIP Code							